

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEES TRANSMITTAL

for FY 2005

MAY 26 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 120.00)

Complete if Known

Application Number	10/075,833
Filing Date	February 13, 2002
First Named Inventor	Jean-Yves Le Naour
Examiner Name	Nhan T. Le
Art Unit	2685
Attorney Docket No.	PF010013

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order None Other (please identify): _____

Customer Number 24498

 Deposit Account: Deposit Account Number 07-0832 Deposit Account Name: THOMSON LICENSING INC.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims

Extra Claims Fee (\$) Fee Paid (\$)

Multiple Dependent Claims

Fee (\$) Fee Paid (\$)

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Independent Claims

Extra Claims Fee (\$) Fee Paid (\$)

Independent Claims

Fee (\$) Fee Paid (\$)

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	- 100 = _____ / 50 = _____	(round up to a whole number) x _____	_____	= _____

4. OTHER FEE(S)

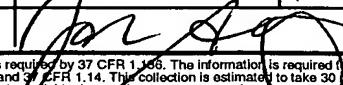
Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): One-month extension fee

\$120.00

SUBMITTED BY

Name (Print/Type)	Jack Schwartz	Registration No. (Attorney/Agent)	34,721	609-734-65866	May 24, 2005
Signature					

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Application Serial No. 10/075,833

Attorney Docket No. PF010013

CERTIFICATE OF MAILING under 37 C.F.R. §1.8

MAY 26 2005

I hereby certify that this amendment is being deposited with the United States Postal Service as First Class Mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

Date: May 24, 2005

Karen Schlauch

Jack Schwartz

Reg. No. 34,721

Karen Schlauch

(Fw)



Application Serial No. 10/075,833

Attorney Docket No. PF010013

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Jean- Yves Le Naour et al.
Serial No. : 10/075,833
Filed : February 13, 2002
For : Receiving Device with Automatic Gain Control
Examiner : Nhan T. Le
Art Unit : 2685

AMENDMENT

Mail Stop Amendments
Commissioners of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir,

In response to the Office Action dated February 1, 2005, for which a shortened statutory period of three months ending May 1, 2005 was set in which to respond and for which pursuant to 37 CFR 1.136(a), a one-month extension, ending 1 June 2005, is hereby requested, the following amendments and comments are submitted and reconsideration of the claim rejections is respectfully requested.

Please charge the required fee of one hundred twenty dollars (\$120.00) for extending the time for a response within the first month after the original response date, pursuant to 37 CFR 1.17(b) to Deposit Account 07-0832.

The Applicants submit that in view of the attached Certificate of Mailing, this response is timely.

Listing/Amendments to the Claims begin on page 2.

Remarks/Arguments begin on page 5.